ESSAYS

ON

THE MEANS

OF

AVOIDING

HABITUAL SICKLINESS,

AND

PREMATURE MORTALITY.

ESSAY SIXTH.

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Nullum ferè morborum chronicorum genus existit, quod a scrofulosâ causâ ortum traxisse non observatum fuerit aliquando.

There is scarce any species of chronic disease which has not, one time or other, been observed to derive its origin from a scrophulous cause.

ESSAY

OF

SCROPHULA.

TWO CLASSES OF DANGEROUS COMPLAINTS.

THERE are various disorders which compleat their course in a few days or in a few weeks. Of these some are accompanied by instantaneous disability, by violent commotions in the system, or by some other striking change. Hence they have been denominated *acute* by medical writers. It is but seldom indeed, when these disorders have once shewn themselves in their proper form, that there is any occasion to caution the patient, or those about him, against procrastination in seeking relief. When they rage in a number of families at the same time, an universal consternation pervades a city or a country. The municipal magistracy, if not the government itself, shall sometimes think it necessary to have recourse to public measures for preventing the progress of the danger. And if we advert to the conduct of the very individuals whose

supreme delight, at other times, consists in hurling defiance at the medical art, we shall observe that their tone is of all others the most changed, when they find themselves in the gripe of an *acute* malady. There are none who more piteously invoke the aid of physicians, or more timorously obey their injunctions.

Disorders which follow an opposite progress are distinguished by the title of *chronic.* They are, doubtless, often equally formidable with those of the former class, whether we consider their issue, or certain periods of their progress. But when unattended at their commencement with severe pain or alarming reduction of the animal powers, (which is the case with some, most eminently deserving to be styled *chronic*), they excite no active interest in society at large. The persons affected, and those about them, remain insensible to their situation. Hence they are often suffered to run on to a dangerous or an irremediable length. And full security, or at most slight suspicion, is at once succeeded by despair. Though sometimes the security and the despair of the nearest relations of chronic invalids are separated by an interval of incredulity, than which nothing is apt more strongly to excite the indignation or the pity of the medical practitioner,

according to the habitual or momentary state of his temper.

From the bills of mortality and the records of medicine, it is manifest that complaints of slow progress occasion as much destruction as those of an opposite nature. And if this be true, it will follow that they must, upon the whole, occasion much more distress. Hence it becomes the duty of writers on preventive medicine, to treat of the more formidable chronic disorders with particular care. There is nothing capable of effectually banishing false security, but a knowledge of the connection between first slight appearances, and the secret operations of fatal causes. A conviction of the understanding, produced by a knowledge of the whole course of slow disorders, will supply the want of that, which in more urgent cases presses upon sense and feeling with irresistible force, and urges all parties to grasp with eagerness at every kind of assistance.

PUBLIC IMPRESSION.

It is not that scrophula is a sound indifferent to the public ear. But the most important truth, however fully acknowledged, must continue as useless as if it were totally

unknown, unless it be particularly applied. We daily hear our divines reproaching us with this species of neglect. Every human individual, they say, is apt to act and speak as if he thought every other subject to disease and death, but scarce ever speculates upon his own insecurity. In like manner, we find the whole world, lamenting the frequency of scrophula in this country. Its inveteracy and the variety of forms, in which it shews itself, are mentioned with terror. It is declared sometimes to make the vital organs its prey; and sometimes, with greater malignity in its method of attack, to derange the functions of the brain, and to bereave those, to whom it has descended, of their reason. To put a total stop to such calamities, the most humane persons profess themselves disposed to severe coercive measures. Nor is it uncommon to hear a law, prohibiting the scrophulous from marrying, proposed by those upon whose constitution or upon whose family the disorder is at the very instant committing unperceived ravages.

It is indeed undeniable that scrophula is exceedingly common in Great Britain. It is equally true that nothing can be imagined more disgusting to behold, or more miserable to endure, than the effects it sometimes pro-

duces. The object, however, begins to have a less gloomy side. For there are few diseases in which the triumph of art has been rendered more compleat. In its worst form, scrophula is to be removed by means, from which not the smallest collateral injury results. In general, its entire eradication from the habit is attended with little difficulty. I need scarce explain the conditions under which I make these declarations. It will be self-evident that there must be means and disposition for a proper course of regimen and medicines. The patient must not be just at the point of death; and the destruction or disorganization of certain vital parts must not have proceeded beyond a given degree; though in parts of too little importance to deserve to be termed *vital*, it is wonderful what damage can be repaired by proper remedies. Indeed, it is scarce in any instance possible, that this complaint should proceed to its incurable stage without extreme penury, gross neglect, or prejudice on the one hand, or unpardonable deficiency of skill on the other. The latter of these causes does not belong to my undertaking. But to obviate the mischiefs of penury and neglect, I think it necessary not only to treat singly of the appearances which scro-

phula usually puts on, but also to give the character of the temperaments which it most readily invades, and to consider some opinions which very commonly prevail, and which I look upon as so many dangerous errors—-Those who take up the present essay for the mere amusement of a vacant hour, will probably find me more than usually tedious. But numbers must feel a desire for the fullest information of which they are capable; and these will be better enabled to support a degree of minuteness by the prospect of the advantages, which I have given them to understand they may draw from it.

FIRST RUDE NOTION OF SCROPHULA.

The term scrophula is derived from the Latin word *scrofa,* which signifies a sow. The appearances, whatever they were, that gave rise to this denomination, occasioned the Greeks to follow the same analogy in their denomination: χοιρας being used both for the animal and the complaint. Various explanations, as is usual in such cases, are brought forward. According to some, the name was adopted because swine are liable

to certain tumours, resembling those in scrophula, though the resemblance extends not farther than form, it having been discovered a few years ago that the *measles* in the hog race are produced by a species of taenia.— According to another derivation, the human neck is said to acquire from scrophulous tumours a degree of that grossness which that of the hog has from nature. Again, the great numbers, in which these tumours are often seen, is childishly supposed to bring to mind the number of young produced by a sow at one litter.

All these etymologies are founded upon the existence of external, and therefore tangible swellings; and to this we generally find that the notion of the disorder is limited among the unprofessional. But this is much too narrow an idea. It is true, and it is essential to understand, that the enlargement of a particular class of glands, called *lymphatic glands*, is one of the earliest and most frequent phenomena exhibited by the complaint. These glands are those which most nearly resemble the acorn, when out of its cup or calyx, from which glands universally derive their appellation. The lymphatic glands are largely distributed through the interior and over the surface of the body.

But as long as they remain in a healthy state, the most superficial do not present any thing elevated, knotty, or rough to the sight or the touch. But as soon as they become affected by scrophula, they immediately enlarge and become very sensible on pressure. At first, they are rather soft, and in some degree elastic. In process of time they grow harder, and swell in knots or clusters, till the formation of *matter* within them restores their softness. Their bulk varies from the size of a pea to that of a kidney-bean and hazle nut. They enlarge to the magnitude of a pigeon's egg, rarely to that of a pullet's. For though glandular lymphatic swellings often attain the size of a goose's egg, particularly under the arm-pit or in the groin, this happens from the enlargement of a whole cluster, and seldom of a single gland. And as to those large swellings which precede the disfiguring scars in the front of the neck under the chin, they take place in glands of a different description, when the habit is more seriously infected by scrophula.

One of the slightest of scrophulous affections, viz. when the swoln glands take the name of *growing kernels*, will give the best idea of the incipient stage of this complaint. Whoever examines this very common ap-

pearance, will find the single tumours moveable, soft, indolent or without pain, and producing no discoloration of the skin. In this state they will remain for a long time, even for a number of years. Afterwards they either disappear from accidental increase of robustness, or enlarge, coalesce with the contiguous skin or *common integuments*, become immoveable, occasion the skin to change from a pale to dark red hue, and give pain; all which circumstances denote progressive inflammation.

Even where they do not give pain on being handled, but are thick set, and somewhat enlarged about the neck, they produce a disagreeable sense of tension, when the head is turned round.

But it is to be observed that all tumours and indurations of the lymphatic glands, are by no means referable to the head of scrophula. I have seen the lymphatic glands of the groin enlarged from a seton in the side, and from an abscess in the buttock. The same thing is well known to happen from the venereal poison. A cancerous tumour will be attended with the same effect. And a temporary enlargement of the lymphatic glands near the inflamed parts, will often accompany catarrh, and, not very unfrequently, a bad tooth. In these, and other

instances, the occasion is so evident, and the origin of the affection of the lymphatic glands so sensible, that there can be little danger of mistake. However, to enable those who have the charge of young persons, (for it is they who are peculiarly susceptible of scrophulous complaints), to judge when the habit may require correction from regimen or drugs, it will be necessary to enter more minutely into particulars.

SCROPHULOUS CONSTITUTION.

The great attention which the physicians of modern times, and particularly those of this country, have been called upon to pay to scrophula, has enabled them to fix, with tolerable precision, upon certain signs, indicating the habit most susceptible of this disease. It is particularly important that the public should be well acquainted with these signs, in order that a preventive regimen may be followed from the beginning, and that recourse may be had to proper remedies, where regimen alone proves insufficient, and the disease seems gaining ground.

The quality of the skin, and particularly that of the complexion, is one of the leading indications. The skin is fine and sleek; the

complexion bright and ruddy. It is often such as, from first appearances, a mother would most desire for a daughter; and an unwary spectator consider as a mark of the most perfect health. This is so frequently the case, that some of those authors who have laboured so much in vain to give *definitions* of diseases, similar to those which occur in books of botanical nomenclature, have made a *fine complexion*, part of the character of scrophula. This part of the character is not merely objectionable, because the disease does not take place in all who have the assigned complexion. For causes to be mentioned hereafter will much more certainly occasion it, where this kind of complexion exists; and if a parent with such a complexion escapes, the progeny is often observed to become scrophulous.—The principal objection against this part of the definition is, that subjects as far as can be ascertained originally pale and sallow, are very often affected by scrophula in some of its worst forms.

Nevertheless, as great stress deserves to be laid upon this, as upon most single indications. There are many readers, to whom I hope I need not explain, that *beauty* is a thing perfectly arbitrary or conventional.

There is no possible cast of features or colour of complexion, to which persons of different age, country, and education, will not apply the epithets both *ugly* and *handsome.* It is true that when associations are more strongly formed, they cannot without much effort of the mind be broken even in persons of reflection, nor broken at all in those who do not reflect. One generation goes on to think and feel, as they have been taught by the preceding. In some points respecting the human person and countenance, we are at this day the disciples of Zeuxis and Praxiteles; the opinions, by whatever causes established in Greece, having descended to us by regular affiliation. But it seems far from impossible to alter these associations. It may indeed be effected by any individual of penetration and address, under whose eye the notions of young people are formed. And who has meditated upon the sources of good and evil in the world, profoundly enough to be able to conceive how much the sum of human happiness and virtue would be enlarged, *if the standard of health were rendered the standard of beauty also?* Towards this indeed every step, made by society at large in the knowledge of animal nature, must inevitably be an advance.

In many novels we meet with a whole exhibition of portraits. The favourite figures however must excite pity or aversion, instead of admiration, in every reader who happens to have a little the advantage over his author in point of information concerning the properties of the human frame.

Were an artist, after the fashion of antiquity, to select the most characteristic circumstances from a number of patients affected with the glandular variety of the complaint under consideration, he might compound a countenance, which the undiscerning should admire exceedingly, both for feature and complexion. It would certainly not fall short of the most perfect ideal beauty of a novelist, and exhibit every trait of the heroine, so far as the description of her charms has any thing in nature corresponding to it. The painting might be so framed, that the face only should in general be visible. But while it was under inspection, it might be contrived that the touch of a spring should bring into view the neck and one of the arms, crossed before the body, in which, with the strictest adherence to nature, might appear various tumours, some suppurating, some discharging matter, and others having left indelible scars, and for the present sur-

rounded by an extensive area of a disagreeable dark red. Such a design might be called *a nimium-ne-crede-colori*, or *look-more-than-skin-deep.* If, on the first impression, it feel cruel to call up such images before the public eye, I hope, on second thoughts, that it will be allowed at least cruel kindness. I would appeal to any one, unfortunately in a condition to sit for such a picture, whether there is most cruelty on the part of those, who would hinder him by law from forming the most endearing of ties, or on the part of one, who gives warning, calculated for preventing the impediment from occurring; and who, if the tie have been formed, would fain persuade the party afflicted to adopt the measures, necessary for preventing the taint from being transmitted to other generations.—Sir Thomas More, by the example of his ideal commonwealth, recommends a previous personal search, lest the discovery of blemishes after marriage should create disgust. It would be better to take care betimes that certain blemishes should not arise before or after this change of state.

When the temperament verges in the smallest degree towards the formation of the actual disease, the face appears fuller or somewhat bloated. This appearance is more

observable in some parts of the face than in others. It shews itself in the cheeks, and between the cheeks and ears. Both eye-lids are puffed, particularly the lower. The nose looks thicker than usual. But more remarkable and more constant than any of these indications, is the enlargement of the upper lip, which often reaches to the partition between the nostrils, and to the *wings* of the nose. The natural depression in the middle of the upper lip becomes now much more conspicuous. Many authors look upon this enlargement of the upper lip as the most certain single mark of a scrophulous tendency. It is true that it is not always present, particularly in grown persons, where the disease is characterized by a concurrence of other undoubted symptoms. It is true also that many individuals and families, entirely free from all taint of this nature, have a tumid and prominent upper lip. But these cases may be generally distinguished by the constancy and original existence of the peculiarity. In the scrophulous, it will be remembered not to have existed, and it will generally fluctuate in size from time to time. —One thing too must carefully be held in mind during the perusal of this and the subsequent tracts. In the present general defi-

ciency of preparatory knowledge, no writer in his senses will think of enabling the unprofessional to distinguish diseases with certainty. It is sufficient to make it clearly understood when there is room for apprehension. Practitioners of medicine, as well as judges and juries, must often proceed upon circumstantial evidence. When the symptoms are of dangerous tendency, when the disorder they portend has infested the family, or is even endemial in the country, when nature is likely to do nothing for the patient, and when the physician is satisfied that he can conduct the treatment without injury, he ought to resort to the most probable remedies without scruple. Men must frequently act on other momentous occasions with the chances less in their favour.

This enlargement of the upper lip, of which I am speaking, is vulgarly considered too as a sign of worms. But nothing is more likely than for worms and the complaint in question to co-exist. Parents are always falling into mischievous errors upon the subject of worms. Worms very often infest children weakened by different maladies. When they are detected, they are considered as the prime or the sole object of regard. Domestic or advertised medicines, often of the most

hazardous quality, are administered. These impair the constitution; or if they expel the worms without injury, the administrator of the remedy sits down content, and the main complaint goes on daily increasing, and infallibly avenges the neglect at some future period.

But not only does the upper lip become enlarged. The nostrils sometimes itch, grow excoriated and ulcerate, or are covered with a thick coating of crusts or scabs. This arises from a too copious discharge of mucus, the membrane, by which it is secreted, being very apt to be weak, or *relaxed* as it is termed, in constitutions of this nature.

Of the complexion, it still remains to be observed, that even in the class of scrophulous subjects, who have cheeks ever so florid, the enlarged upper lip, the nose, and the circumjacent skin are of a dead, pale, and unwholesome hue; by which contrast those who are accustomed to medical physiognomy will often recognize the complaint at first glance, and it ought to give others suspicion, if they will but avail themselves of their senses, and beware of a cheek like rouge, with a muzzle like white lead.

Before any positive symptoms of disease exist, and especially when the complexion is bright, the eyes are large, lucid, and such

as to be esteemed highly beautiful. At this period too, the pupil is unusually dilated. In infants of the soundest habit, the pupil is larger than in adults, but on comparing such as from other circumstances appear to have a disposition to scrophula, the appearance will be found much more distinct, and to give the eye a darkness in the centre, which by the uninformed is esteemed as contributing to beauty. But from a variety of considerations, there is no doubt but it betokens constitutional debility, wherever it is habitual. Indeed when only occasional, it accompanies those states, in which the system is most remarkably deprived of its vigour. It is seen in fainting, in low fever, and in the weaknesses brought on by the most hurtful excesses of youth. No wonder that the fibres of the iris should lose their tone, in common with the rest of the living fibres.

A light, grey or blue eye, has been enumerated among the marks of scrophula. It certainly often occurs, as well as light hair, in this temperament. Those however who have wide opportunities of observation, will find that the other tokens frequently concur with black hair and black eyes.

The general appearance of the skin—(and not merely that of the face)—as also of

those veins which run along the surface of the body, is particularly worthy of regard, insomuch that this one indication, where it shews itself in young people, with general feebleness or indisposition to exercise, ought to put their friends upon their guard. The skin is conspicuous for the superior smoothness and fineness of its texture. It exhibits appearances that give the idea of transparency. These are owing to the full, fine blue of the veins. In patients far advanced in scrophulous disorders, those vessels have actually looked to me as if filled with ink. And besides their colour, they are unusually turgid.

The older medical writers have laid great stress upon shortness of the neck, as well as on the shortness and narrowness of the forehead, the flatness of the temples, and the depth of the jaw-bones. But the very contrary to some of these circumstances for the most part obtains; as, for instance, in regard to the neck. The depth of the jaw is also produced by the actual existence of the disease, as manifested in the enlargement of the subjacent glands. The same is the case with regard to the neck, where the lymphatic and the other glands come to be swelled. Now as the lower parts of the face

are dilated in size, the whole proportion of the features must evidently alter, and the forehead of course will look narrower and lower.

It is undoubted however that in the scrophulous temperament, the whole head, particularly its hinder part, does attain a larger size. This happens particularly to those who have been rickety in infancy. For between the one disease and the other, there exists probably no difference, except in the time of life, and the parts attacked. We well know that one of the most important early processes in the constitution, is to form the compound (perfectly understood by modern chemists, as being formed of lime and acids *) from which the bones derive their hardness. In many scrophulous constitutions this process is carried on too sluggishly, and the bones swell and become crooked in

* I have found by experiments made at the pneumatic institution, that when growing animals are put to breathe a larger portion of oxygen air, their bones are rendered wonderfully solid, and their growth checked—a fact, immediately applicable to certain scrophulous invalids, where the growth is too rapid. I mention the circumstance here out of place, lest the publication of the experiments should be delayed longer than could be wished, by engravings, intended for their illustration.

consequence. It is common to find those who have been rickety at one period, afflicted afterwards with the *evil.* And the children of mothers who have been rickety, will very frequently turn out scrophulous, without any disposition to that disease on the part of the father, and without the operation of any particularly unfavourable cause on the offspring. And in some families, part of the children shall be rickety and part scrophulous, so that not one among a great number of brothers and sisters, shall escape the one complaint or the other.

The intellectual superiority of children of the scrophulous temperament has long been noticed, and it is certainly found to exist in a large proportion of cases. That sensibility or openness to impression, which is one of the principal constituents of genius, has often been observed to accompany different diseases of debility. The compleat distinction of circumstances, and ascertainment of causes is one of the remotest benefits, to be expected from the knowledge of the human mind, when that shall attain the point of perfection, for which the labours of Hobbes, Hartley, Locke, and Abraham Tucker have prepared the way.

In some cases of scrophula, however, when

the disease has made considerable progress, the effect is entirely opposite. For there is a form of scrophula, in which the intellectual and other functions are equally impaired. Such cases almost universally belong to the class, marked by a symptom easy to be distinguished, and of which the very first appearance should be the signal for seeking instruction how to arrest the progress of the whole complaint, and for persevering not only till so much of it as has actually taken place, shall be removed, but till the constitution has lost its scrophulous tendency. The symptom to which I allude is an enlargement and a hardness of the belly, especially towards evening. In the infants and young children of the poor, and in those who are ill-fed and generally ill-managed, this enlargement and hardness of the belly passes by gradations more or less quick into perfect atrophy. The character of the countenance here often differs totally from that, which is usually described as denoting the scrophulous temperament. The face is indeed bloated, and that in a still greater degree, but it is of a uniform sallow. The eyes are dead, and disposed to weep. The little invalids are heavy, peevish, gloomy, and without relish for the usual sports of their age. They have fre-

quently that superiority of the understanding which belongs to the other variety of the disease. But in place of being lively, they are considerate beyond their years. So that, in pursuance of a language long adopted in medicine, the one may be called *sanguineous*, the other *phlegmatic* scrophula. When the symptoms are suffered to increase, and when the disease bears upon the mental faculties, not only the face, but the body and limbs are apt to be universally bloated. The hands and feet are habitually cold, and assume a purple hue. The bowels are so sluggish, that opening medicines are almost always necessary, and these to produce their effect must be of the sharpest kind. Every thing, in short, conspires to indicate torpor of body and mind. If there be any enlarged lymphatic or other glands about the neck and throat, (and this symptom is frequently absent), they partake of the predominating quality of the whole system. They are almost sure to be without pain. They enlarge slowly, or not at all, after once becoming perceptible; and, of course, it is exceedingly unusual for them to gather and break. That rickety tendency, which is denoted by a head of unusual size, and by

large joints, is often seen in this species or variety of scrophula.

Opulent parents will never suffer such a complaint as this, to arise to a certain height unchecked. But it is here that they deceive themselves; and, after measures of small avail sit down content, while the disorder only changes its seat and form. The enlargment of the belly, and perhaps also of the upper lip, are considered as implying the presence of worms. Recourse is accordingly had to some standing family composition against these animals, or to the pill and lozenge most recently announced in the newspapers, under the sanction of reverend and titled names—Worms are expelled. The pill or lozenge, if it contain mercury, as it frequently will be found to do, may diminish for a time the scrophulous affection of the glands lodged in the belly. And the consequence of this may be, to favour the eruption of the disorder elsewhere. At least, it is commonly enough to be remarked that children, early affected with enlargement of the belly, and with the usual concomitant symptoms, are seized in the course of two or three years in more superficial parts, if by accident or design the first complaint

should be lessened or removed, but no sufficient means adopted for clearing the constitution entirely.

SCROPHULOUS ATROPHY OF THE CHILDREN OF THE POOR, MORE PARTICULARLY CONSIDERED.

We have many proprietors of extensive estates, and of large manufactories, who interest themselves not only about the comfort, but about the health of their labourers, and of their labourers' families. In a time of sickness, these proprietors not only give away money and costly liquors to a considerable amount, but (what bespeaks infinitely more charity of heart), they do not grudge time and attendance. The gentlemen sometimes, and sometimes the ladies, regularly distribute remedies to a crowd of needy applicants. Their excellent intentions would however be crowned with far greater success, and by the same expence and trouble they would relieve a much more considerable number of objects, if they made it their aim to prevent, instead of curing, or even employing medical practitioners to cure, the disorders of their inferiors. And by this change of plan they would escape many of those disagreeable

feelings that at present they owe to their kind offices. It will be sufficient, in the first place, that they make themselves acquainted with the marks of the most common chronic disorders, and afterwards that they inspect the families of the poor from time to time, with a view to the state of their health. It is by no means incumbent upon the superiors to ascertain the particular ailment with the accuracy, which ought always to precede the administration of remedies. A little practice and information will soon enable them to distinguish, among the various drooping human creatures that will catch their attention, such as a very moderate quantity of drugs, seasonably employed, will snatch from a miserable death, though they would not have the smallest chance of relief from the bounty of nature. The success of a mode of charity, so extensive and yet so prudently restricted, would create a new interest in life; and to the satisfaction of loading the memory of Howard with benedictions, would be added one much more solid, that of following this example.—When the opulent have not leisure or inclination, or do not suppose themselves qualified, to act as inspectors of those who stand to them in some subordinate relation, how easy to

employ a professional deputy! This would not only be serving the indigent invalids in their neighbourhood. It would be also promoting the most useful part of medical science. Nothing is so much wanting as incentives to study the prognostics of slow diseases, and the means of prevention. Providence, for some inscrutable reason, in former ages almost always saw it fitting to disjoin wealth, and the inclination to use wealth to the best purposes. The means and the inclination we now frequently see united. But the knowledge is still for the most part wanting!

No portion of the afflicted poor would profit more by such a system of beneficence than the scrophulous. The peculiar *waste* or *atrophy* occasioned by this disease, when it affects the *mesenteric* glands, is not indeed by any means confined to the abodes of poverty. But it is infinitely more frequent there than elsewhere. And in consequence of the supineness, the ignorance, and the distress of the parents, it often proves fatal, though in all but its extreme stage, it is perfectly curable. No complaint bears more distinct characters. A very brief description of it, in addition to what has been said in the former part of this essay, will enable those who are willing to exert themselves in behalf

of their helpless neighbours or dependants, to recognize it with the utmost certainty.

The belly of scrophulous young persons is almost always inclined to protuberance. But when that affection of the glands, lodged within the belly, or of the mesenteric glands, by which the protuberance is caused, has proceeded to the length of atrophy, this appearance becomes peculiarly striking. And not only a fulness, but a hardness will be felt about the navel. Sometimes, and at a certain period, hard inequalities will be sensible to the touch. The little sufferers (for it is always found to affect young children principally), will hardly be so stupid as not to have noticed those sensations, which in most cases are present, and which, where they are, will materially assist the judgment. One of these sensations is a weight about or below the navel. Another is frequent griping pain. There will exist an interior disorder, corresponding to the exterior. Sometimes it will be aversion to food; at others, an insatiable appetite, or the desire of gross, farinaceous aliment, or of substances not fit to be used as articles of diet. The bowels will seldom be regular; often too open; now and then, the contrary. The evacuations will have an unhealthy look, from being

charged with slime or from being too light of colour, because the liver does not secrete bile of a proper tinging quality. The advance of the complaint (and occasionally its more early stage), is accompanied by a very offensive purging.

The emaciation of the limbs will form a most disfiguring contrast with the enlargement of the belly. The skin will be found to hang loose, and sometimes, if doubled, to go almost round the member to which it belongs. It will also be of a dingy or dark colour. The complexion of course will be of a sallow or deadly pale, except when the hectic flush prints its deceitful and ill-omened animation on the cheek.

The fever will soon declare itself by other signals. A general indisposition and lassitude will come on, especially in the evening. Shiverings will be felt; and to these an universal dry heat will succed, with a degree of general or partial moisture in the course of the night.

AFFECTION OF THE EYES.

With the complexional signs of scrophula, we shall often find conjoined a weeping and weakness, with inflammation of the eyes. If

the lower eye-lid be turned down so that the interior surface shall come into view, it will appear more red than in the healthy; and vessels will be manifest, turgid with blood, on the white part of the eye-ball. This sort of inflammation is peculiarly conspicuous after waking in the morning. Frequently white spots will be found to occupy the transparent part of the cornea. These give alarm at first. But as they generally disappear altogether after a time, or speedily shift their situation, they are overlooked or forgotten by uninformed parents. Nor is it uncommon for short-sighted medical practitioners to tranquillize them by an assurance that *this is a thing which the child will not fail to overgrow.* It is indeed but seldom that these opake spots deprive children of sight. But other scrophulous complaints supervene; and unless the party affected has the uncommon good fortune to be thrown into a way of life, highly favourable to a delicate constitution, he will either be disfigured, mutilated, or destroyed, between childhood and maturity. This disorder of the eyes rarely occurs alone. When attended, as it usually is, by general weakness, the most unremitting endeavours should be used, for years together if necessary, to remove both the

one and the other. If by chance there should be discovered, on examination, no want of general strength at the moment, it will be highly necessary to keep a sharp look-out for those more serious symptoms, which will hardly fail to break forth in due course of time.

CHILBLAINS.

Those who have opportunities of inspecting numerous troops of English children, will easily remark that the most scrophulous by habit and by descent, are most troubled with chilblains. In Scotland, where a different mode of dress in early life inures the feet to the vicissitudes of heat and cold, chilblains, I believe, are infinitely less known: and in Scotland of course, scrophulous ailments attack less hardy parts.

It is very commonly observed, that those who have chilblains when young, are after their disappearance destroyed by some complaint of the scrophulous class. Hence it is concluded that the cause producing chilblains has migrated from the feet (and it may be from the hands,) to some nobler organ, and that if the chilblains had continued to break out as before, no disorder more serious

would have occurred. This opinion must be allowed to have some semblance of truth. But even in speculation, as thus generally enuntiated, it is, I apprehend, incorrect; and, in its influence on practice, it is probably as mischievous as the most arrant falsehood. Of many disorders it is unquestionable that while they are in force in one part, they do not invade any other. As long, for example, as the gouty inflammation keeps up in the ball of the great toe, the stomach will be safe. But again, it should be considered that as long as the morbid habit continues, vital organs must be liable to seizure. And by a slight change in his mode of life, the patient may unwittingly occasion the retrocession of the disease. Independently of any such change, and in spite of the most scrupulous care, the progressive developement or the unavoidable decay of the system may give rise to the same disaster.

In regard to chilblains, it is obvious that their occasional causes, merely in consequence of our usages, will operate with less force and frequency after the period of puberty. The feet and hands of men and women are not chilled in the same cruel manner, as we have found those of boys and girls to be. But it is not unlikely that natural and neces-

sary alterations in the constitution would frequently call the scrophulous action from the extremities to the centre of the machine, even though the utmost pains were taken to secure an annual crop of chilblains. It is common enough to see a local scrophulous affection, far more severe than chilblains, superseded by others still more violent. In the lymphatic glands about the neck, it usually happens that as one dries up, another suppurates. When even ulcers affect the bones of the fingers, they shall heal, if that kind of seizure of the spine come on, which is followed by distortion. In a patient where I certainly knew that the salivary glands were diseased, because I could feel them and because there was present every mark of the scrophulous temperament, and where the strongest evidence existed of disease in the mesenteric glands also, I have seen the morbid action pass almost as suddenly from the neck to the belly, and from the belly to the neck, as it ever does from limb to limb in gout. When the belly became turgid, tense, and painful, the salivary glands sensibly subsided and grew easy, and *vice versâ*. These changes took place repeatedly in the space of a single day.

The true policy, therefore, is plainly still

the same. If we would avoid sudden death from gouty seizures in the stomach, let us use such medicines and pursue such a regimen as will clear the constitution, and prevent this terrible disease from taking possession either of the centre, or of the extremities. If we would avoid slow death from the destruction of vital organs, let us put an end to chilblains by agents that will produce a general improvement of the habit; and not absurdly lament that our heels cease to inflame and chap. For how should it be otherwise, when they are no longer affected by the proper causes of chilblains, considerable inequalities of temperature?

OBSERVATION TO PREVENT MISCONSTRUCTION.

It is proper that one thing should be clearly understood concerning several of the indications of scrophula. They have no necessary and general, but only a local and accidental connection with this disease. In a different climate, all, except the slow tumours of the glands, would betoken a tendency to complaints of a nature altogether different. And as to the tumours of glands, even though they should never advance

beyond the state of *growing kernels*, they ought in strictness to be regarded as real scrophula. Thus in the West Indies, for example, enlargement of the pupil of the eye, and distension of the superficial veins would not, in one instance in twenty, be followed by any of those disorders, which in this country we consider as scrophulous, but by feebleness of the digestive organs, or by a state of excessive general languor. These signs therefore in reality do but indicate constitutional debility. And it is owing to the nature of our climate, to our diet, to propensities transmitted from parent to child, or to some other unexplored causes, that scrophula so frequently attacks people distinguished by these particularities. It is nevertheless obvious that an acquaintance with them is nearly as useful as if they were absolutely specific in their import.

The general reader will be at no loss to perceive how preposterously certain authors have judged in restricting some of these signs to a particular ailment. Thus, for example, a professor in an university, celebrated as a medical school, insists upon it that a puffing of the wings of the nose, of the upper lip, and of the parts adjacent, is to be considered as an infallible token of

worms *. But neither this puffing, nor the dilatation of the pupil, have any fixed inseparable connection with the state of other parts. They are properly affections of the parts themselves. They may originate in local causes, and be quite confined to the spot. They may also be associated with an unhealthy condition of a distant organ. The proof is easy. The one or the other can be produced at pleasure by art. The dilatation of the pupil by introducing the preparation of a narcotic plant into the eye: the puffing, by cold applications to the features in question.

That the marks of the scrophulous temperament, as distinguished from the early and slight, but positive symptoms of the disease itself, are merely signs of general or local debility, is rendered more than probable by another fact. Women are more liable to this complaint than men. In childhood the evil appears to be pretty equally distributed between the sexes. But as they grow up, every circumstance in the mode of life, and all the differences in the bodily functions, are unfavourable to females. For

* Dr. Home's Clinical Experiments, § xx.

one boy we find at least four, and perhaps six girls, labouring under some scrophulous complaints, as distortion or curvature of the spine; and in no instance is the proportion reversed.

OF SOME OF THE GRAVER SCROPHULOUS COMPLAINTS.

These are foul ulcers from suppurated and broken glands, scrophulous consumption, complaints of various name about the bones, and particularly the joints, as *spina ventosa*, water on the brain, disease of the hip joint, lumbar or psoas abscess, white swelling, impaired vision or blindness, ear-ache, discharge of matter from the ear, and deafness. Indeed these affections of the ear have as good a right as most of the other circumstances enumerated above, to be considered as admonitions to guard against more serious attacks of scrophula hereafter.

Glandular ulcers are the most easy to be foreseen: at least where the external glands are concerned. The swelling in this case gives timely and sufficient notice.

Of consumption I shall treat in the subsequent essay.

Spina ventosa, or the *windy thorn*, is an

absurd Arabian denomination. The epithet *windy*, or *puffy*, is deduced from the aspect of the bony tumour, as if it were inflated with air; and to account for the other term, the pain is said to be sometimes such as would arise from a thorn, lodged within the diseased part. Modern authors have called the complaint *Pædarthrocace*, or the *child's joint-disease.* Whatever be the most appropriate name, the scrophulous affection of the bone varies as much in its progress as that of the glands. Sometimes there shall be no pain, but only a swelling, for years before the skin is broken and a running ulcer formed. In more rapid cases, the patient shall be sensible of an indistinct feeling in the part, which shall exhibit no preternatural appearance, nor give any pain on pressure. After some time however a tumour shall arise, and in the course of a few weeks a redness be evident. By degrees the red shall change to a livid hue. At last it shall break, and discharge a thin, wheyish, or ruddy liquid. The ulcer on examination is found to reach to the bone; and this proves rugged, unequal, and spungy on its surface. The different variations of this complaint are observed to affect the larger and smaller bones alike; the joints of the shoulder,

thigh, and wrist, as well as those of the fingers and toes.

Water on the brain, or enlarged head, is one of the most palpable of diseases, often affecting children before birth, and indeed extinguishing life in the womb. It will probably disappear altogether, or in great measure, as soon as the scrophulous part of the public shall have knowledge and good sense enough to take the proper measures for cleansing the constitution of this taint. There are some families where the hope of progeny is continually defeated by this and other kindred diseases, the children being either still-born, or regularly perishing about a given age. In these cases, much may be expected from proper preventive measures applied to all parties. If the fault be on the side of the mother, she might pursue a course of scrophulous remedies during pregnancy, and of these, she would find the most effectual not only safe during that period, but beneficial for the future. The children should be put upon a regimen, suggested by a true knowledge of the animal œconomy, and not taken up on the faith of books on the disorders of infants, of which the authors, in spite of all their experience, too often partake of that scantiness of ideas, and that

impotence of combination, which is implied in the phrase—*Such a person is no better than an old woman.*

Swellings from inflammation usually become red in a short time. But we have seen that it is otherwise in glandular swellings from the king's evil. It is also long before the scrophulous swellings of the joints grow discoloured. Hence a particular variety has been called *white swelling*, or *fungus of the joints.* This disorder attacks the larger joints in preference. The term is indeed almost confined to the knee. The tumours it causes are often soft at first and elastic, yielding to pressure, but not pitting. The pain, for the most part, is excessive at the onset; though sometimes the usual indolent character of the scrophulous class of tumours prevails here. The pain, however, when it does exist, is generally very circumscribed—it is sometimes unremitting, sometimes periodical: even when most excruciating, it is scarcely attended at first by any perceptible swelling. It encreases upon the slightest motion; and the patient being obliged to keep his limb in the same posture, in no long time loses the use of the joint. In the natural course of the malady, the distress lessens as the joint enlarges. And soon an increase of the ends

of the bone is perceptible. The soft parts partaking of the disease, the tumour grows more elastic, smooth, and shining, and by degrees acquires somewhat of a red hue. The disorganization advances; abscesses form with variety of fistulas and sinuses. These break at last, and discharge the ill-conditioned, wheyish, and curdy matter, peculiar to scrophulous sores. The first ulcers will occasionally heal, but new ones do not fail to succeed. A decay or caries of the bone is easily detected at the bottom of the ulcer, and long splinters or exfoliations run out along with the matter. Hectic fever is formed. Of course the patient falls away, and at last perishes amid those sufferings, which diseases accompanied by hectic fever always induce. This is, it should be remembered, an excessively meagre representation of the natural course and termination of white swelling. Means heretofore in use undoubtedly sometimes arrest the complaint. But if it be suffered to proceed to a certain length, the precarious measure of amputation has been considered as the only resource.

In lumbar or psoas abscess a slow, indistinct and often unperceived inflammation arises in the inside of the spine and ribs among the muscles, corresponding to the

inside of the sirloin of beef. The patient is at length surprised with a soft tumour in the groin, or low down in the thighs, towards the inner knee. On the discovery the surgeon is summoned; the family is shocked by the intelligence, that the appearance is occasioned by purulent matter, descending from a psoas abcess; the most approved expedients of the chirurgical art are employed, and usually without success; the symptomatic fever comes on; floods of matter continue to be discharged; the body wastes in proportion, and scenes of misery succeed, which neither pen nor tongue is adequate to describe.

MORAL.

I content myself with a very superficial extract from the history of secondary or confirmed scrophulous affections, as they are sometimes called. But it will be sufficient for the purpose, or a longer would be equally unavailing. Its intention is to deter parents from ever remaining content as long as they perceive a child of scrophulous temperament, suffering from local or general debility. There are I know medical practitioners in abundance, who when the immediate symp-

toms are slight, though they be ever so distinct in their character, will overlook the continual admonitions of experience, and encourage a dependance on accident.—Indolence creates an aversion to active and persevering measures. Pride disinclines people to listen to truths, which they suppose derogatory to themselves, and to their progeny. Nor is it difficult to perceive how readily in such circumstances parental tenderness will take part with parental pride. For these reasons, the destructive opinions of the shallow and the complaisant among the members of the medical profession so often prevail over the saving counsel of the sagacious and the sincere. Yet if reference were made to a set of umpires, free from all improper bias, it is easy to see what their award must be, when the signs of a tainted habit are undeniable and the system less vigorous than it ought to be for the season of life. Each as an impartial spectator would recommend the very thing, which as a partial parent and as one called upon to act in conformity to his sentence, he might decline. For whatever the future may be likely to bring forth, can any thing better be done for a young person than to render him robust? What though the process be tedious? and what though it should

require to be resumed from year to year? Who grudges pains and perseverance, when the question is to reclaim a piece of land from the waste? Shall we hesitate to devote as many months to health as we are willing to devote of years to gain? And shall we account it a small thing to escape, when we are threatened with deformity, mutilation, and torture?

But besides timely remedies and proper regimen, it is in our power to take another security against secondary scrophulous complaints, rising to an irremediable height, before they are discovered. This consists in teaching children accurately to distinguish the parts of the body. Such information will lead them to observe many important changes, which as they take place slowly, are apt to proceed unobserved. It would also render them alive to sensations, that would otherwise escape attention. We have seen that the psoas abscess is one of the most formidable of scrophulous complaints. It often, as we have also seen, runs on unawares to a fatal length. Yet it seldom happens that its progress is not attended by feelings distinct enough; only they are not painful, or not severely painful, and so are disregarded. Now the measure I recommend would, I

believe, infallibly occasion the disease to be detected at its commencement; and then, I have little doubt but it could be cured with great ease in the majority of cases. It is obvious that the utility of this measure would extend far beyond the range of scrophulous complaints. The ignorant of all denominations, and the poor and the young among the rest, we perpetually find unable to fix, with any tolerable accuracy, the seat of their maladies. Hence arises one great difficulty in their treatment.

But the labour of the parents would bring with it its own reward. In teaching they would learn. The persons of their children being subject to more frequent examination, it would be more difficult for disorders to lurk about them undetected. And the oftner they should examine, the more accurately would they be qualified to judge of every deviation from the healthy standard.

These considerations, I flatter myself, will reconcile some readers to that recommendation of the study of anatomy, which hitherto they may have considered as a ridiculous whim. If I have succeeded in giving them any tolerable idea of some, among the principal varieties of scrophula, they will not be slow to acknowledge, that it is a species of knowledge capable of universal and

daily subservience to the most beneficial purposes. That the state even of superficial parts will be understood the more clearly for some anatomical knowledge, is what I need not take much pains to prove: and for judging with any certainty of the affections of the deep-seated organs, it is obvious that such knowledge is indispensable. The less, indeed, any one is dazzled with the vain glare and glitter of outward trappings, and the deeper insight into the various conditions of human existence he has acquired, the more plainly will he discern the inestimable advantage which must accrue to every family from physiological,—that is, applied anatomical—information in its heads. It is probably not too much to expect, that when any considerable portion of mankind shall be capable of appreciating the value of the different sciences, and of distinguishing the most worthy objects of desire, physiology will come to be considered as the domestic science *par excellence.* At present we are in general poorly qualified to choose among the things which it is in our power to attain. We deem it profane to look forward, except to the precise distance, and just in the direction, which we have been taught. Hence it holds at this day nearly as in the time

of that sagacious satyrist of antiquity, who on a survey of the pursuits of his contemporaries, declares that few could distinguish substantial from specious blessings.

CAUSES FAVOURING OR PRODUCING SCROPHULA.

Of these some may be said to exist before the individual, some are casual and sudden, some require application for a long time before any sensible effect follows. I shall consider the two former sets of causes in the present section. The condition of the parents is frequently decisive for the progeny. The fruit of too young matches has been observed to be subject to scrophulous atrophy, and other scrophulous disorders. This is particularly said to occur in manufacturing places, where the intercourse of the sexes takes place early, and various circumstances co-operate with original weakness of stamina, in producing the disease. The same calamity befals the children of marriages, contracted at too advanced a period of life;—no matter whether it be the old age of years, or the old age of debauchery.

All the world is aware that scrophula runs in families. Many curious opinions have

been advanced by minute observers upon this point. It is well ascertained that when the disorder has infected one generation, it shall often disappear in the succeeding, but come out again in the next, or even in that following. Hence we see that in infected families endeavours to eradicate the evil should never be intermitted, when its precursory signs are apparent. Many instances have occurred of numerous families, where part have been exempt from scrophula, and part miserable sufferers. This has led the ingenious to investigate, or tempted them to divine, the reason of the difference. According to some, the children, resembling the diseased or morbidly disposed parents, are those that become diseased. To ascertain the actual observance of any such law by nature, requires more extensive experience than commonly falls to the lot of one man; and it is always to be feared that the exceptions may be as numerous as the instances confirming the law. We often see one parent give feature, and another complexion; and sometimes one contributes this feature, and that another. I have seen various scrophulous patients strikingly like the untainted mother, while the father only had been a martyr to the complaint. So that the real laws of transmission

seem enveloped in the same obscurity as every thing else connected with generation. Some have believed that the morbid disposition follows the sex; and they quote instances, where all the sons of a scrophulous father have become scrophulous, and where all the girls have escaped, though the latter have borne a strong resemblance to the father.

Those who are intent upon keeping their family sound, had therefore better lay no stress upon such observations. If the father or mother, or a more remote ancestor have been infected, the circumstance ought to be regarded as a strong additional motive for adhering to those precautions, which the tokens of the scrophulous temperament or a weakly habit may suggest.

Nothing is more notorious than the tendency of the small-pox to induce scrophulous disorders, where there has existed the smallest predisposition. Probably also the small-pox has affected the glandular part of the system sufficiently to bring on the disease, independently of all predisposition. Nor is there any other consideration which induces experienced medical men to set a higher value upon the mode of inoculation lately introduced; since the fever attending the cow-pox appears by no means strong enough to

make a dangerous impression on any set of organs. For the glands are far from being the only part injured by the inoculated small-pox, even when mild in its symptoms. I have very lately been consulted for a young person of a thoroughly scrophulous race, in whom the small-pox, though nothing severe, left behind it a palsy of one entire side.

What is true of the small-pox holds in an inferior degree of measles. Low fever, scarlet fever, the malignant sore throat, excite glandular tumours. But these tumours often follow a different course from the scrophulous, when they occupy the same seat. They ought not therefore to be referred to the same head. Still by these febrile complaints, genuine scrophula, and scrophula of the most dangerous kind, is sometimes excited. It is is therefore to be wished that the plan, now pursuing with vigour in several places for stopping the progress of febrile infection, may become general. *Fever wards*, or *houses of recovery* for the poor, might be established in every town, on a scale proportioned to its size and opulence. Contagion cannot pass long from person to person among the needy, without occasionally alighting upon the opulent. And when it does, they are not only, in common with others, exposed to the danger

of speedy dissolution, but also, under certain circumstances at least, to that which arises from a secondary superinduced malady. It is true that the fire of malignant fever is generally kindled among the poor. But when once kindled, it may justly be regarded as rising in a *gerbe*. Being seated therefore a few seats higher in the amphitheatre of life, does not secure any one against being reached by the fatal spray. There is scarce a town or city in the whole united dominions, where some possessor of useless opulence would not give the necessary sum to redeem the immediate or remote mischief, that has happened under his own roof for want of a public provision against the dissemination of febrile contagion.

HINTS TOWARDS BRINGING UP CHILDREN NOT TO BE SCROPHULOUS.

It is of most importance to make the public acquainted with the causes that are of slow operation. Thus every parent in affluent circumstances will perceive that he has them in great measure in his power. It will then remain for him to determine whether he shall set them to work, or in other words, whether he chooses to have his children af-

fected with scrophula, or that they should grow up free from this calamity.

The diet most proper for encouraging the scrophulous disposition, is less in vogue now than formerly. People have at last suffered themselves to be persuaded to indulge weakly children with animal food, and its various preparations. But the dread of rendering the blood sharp, or of generating foul, acrimonious humours, still occasions some lots of children to do penance upon vegetable fare. Some of the most dreadful instances I have seen of the ravages of the disease, and of the transmitted disposition, have been, where the mothers were strict in this article. A few years ago, two healthy parents, who had subjected a very numerous family to a meagre regimen, boasted to me of their success in education. Since that time, a third of the children have been attacked by scrophulous ailments, without the intervention of any acute illness, except in one case. It would appear that similar misfortunes still more frequently originate from the same source on the Continent. "There are parents" says a modern well-informed foreign writer, "among our no-"blesse, who altogether withhold flesh-meat "from their children till their fifth, and

"even their seventh year, feeding them "entirely on garden-stuff, wheaten bread, "biscuit and milk, under an idea that some "mighty advantage is to result to the poor "little creatures. To such parents, on their "boasting of the effects of this plan, I have "been able to point out a distinct protu-"berance of the belly, with other marks of "tendency to scrophula. Thus I have "wrought a conviction that the children "were not so healthy as was supposed. "Doubtless, in our temperate latitudes, a diet "merely vegetable is not suited to infants of "two years old and upwards."—With us, preparations of animal food are most suitable to some children, less than two months old. Within the first year, infants will suck a bone with great glee. Nor when weakly, do they digest bread properly without a mixture of animal matter. The permanent state of the constitution depends in many instances upon a well adapted diet during the two first years. And I do not understand how parents can depend upon the strict observance of good rules, unless they will enforce it by personal inspection.

Another practice, formerly general, is very much gone into disuse. Otherwise, as constitutions go now, it would be difficult to

say who could escape scrophula.. Should it be any where carried on at present, (and if so, it is on quite young infants), or should it be revived hereafter, let Sydenham unfold the consequences. "It is certain" says this celebrated observer, "that frequent purging "does much mischief in weakly habits, and "particularly at a tender age. ————. "Tumours are produced in the belly; and "they increase in bulk the more, the oftner "the purging process is repeated. The whole "œconomy of the bowels is sometimes dis-"turbed by frequent purgatives. The me-"senteric glands acquire a preternatural "size, and these and similar complaints "pave the road to the grave." At this day, the observation may not be unworthy the notice of persons, ready on every slight pretext to recur to worm medicines.

No single cause contributes more to the production of scrophula than cold. A single severe chill has often been found sufficient to produce true scrophulous enlargement of the glands; and there is much reason to believe that psoas abscess itself has often, among other causes, originated from continuing too long, though but for once, in cold water; from damp sheets; from wet unchanged cloaths; and from a single exposure

of some continuance to a rigourous atmosphere, particularly when the chill was directed to the back and loins. I have most certainly known abscesses, succeeded by a fistula, to take place in a scrophulous subject, in consequence of sitting down for a time on a wet seat; and it has gone exceedingly hard with the patient.

I have already spoken at large of protracted chills, and I have also considered the effect of mental depression upon the general health of young people. In what relation the latter cause, and those other causes with which it is usually associated, stand to scrophula, shall be stated in the words of an author, with whose sentiments on this point I have only become acquainted since the first part of this essay went to the press. Let his hypothetical phrases be excused, or rather let them be considered as awkward forms of expression. In recounting the occasional causes of scrophula, he says—"depressing affections of the "mind have the most pernicious influence "on the human body, particularly sadness "and grief, when long protracted. The ner-"vous power languishes; the parts lose their "tone; the vital movements fail; hence the "circulation of the humours becomes slow, "the functions of the abdominal viscera are

"disordered, the fluids grow viscid, coction "and nutrition proceed imperfectly. That "such affections of the mind may give birth "to scrophula, appears as well from direct "experience, as from analogy." — — — — "They exert their most deleterious influence "upon children and infants. For it is on "young animals that nature has especially "bestowed vivacity of spirits and lightness "of heart, in order to promote their growth "and invigorate the system. Nevertheless, "a senseless mode of education * presses "upon the feelings of infants in a manner, "scarce conceivable. Image to yourself "little boys confined almost all day in a "school, forced to commit a tribe of words "and other things to memory, and kept in "constant dread by that apparatus of terri-"fying objects, which surrounds the master. "Can any thing be conceived more perni-"cious, and better calculated to ruin the "health of beings, so delicate and so tender?

* Severior sanæque rationi contraria educatio eo haud raro adigit infantes, ut moerore excrucientur, *acerbo sæpe magis, quam quis crederet*. Cogitemus pueros, qui per totum fere diem in scholis sedere coguntur, ad vocabula aliaque memoriæ imprimenda adstringuntur multiplici terriculamentorum apparatu a magistris in perpetuo quasi metu detinentur, &c. &c.

"What a variety of noxious powers combine "their influence! an atmosphere vitiated by "the multitude of those who breathe it— "exercise of mind out of all proportion to "the strength—fear, grief, sadness—defect "of motion, which is so essentially neces- "sary! There are many parents, who, with "ill-advised kindness, place their little chil- "dren the whole day long under the severe "inspection of preceptors, to keep them from "running about and coming to harm. Such "abuses, we are convinced, must impress a "character of melancholy on the minds of "infants, and sow the seeds of numberless "diseases in the body. Daily experience "shews how efficacious they are in gene- "rating the scrophulous diathesis."

Among several instances I could adduce to shew how justly the author insists upon the *extreme bitterness of grief*, experienced by children on first being put to school, and its bad effects, I shall mention two. A boy of fair average capacity had passed his time agreeably between exercise and learning. He had acquired a strong desire to learn Latin, and was put to a day-school. The unintelligible nonsense at the beginning of the accidence, however, immediately checked his ardour. Whole nights of the first week were

spent in tears. By day he was gloomy and without appetite. His whole soul seemed to be absorbed by hatred of his tasks, and by fear lest he should not learn them against the appointed hour. The farther he went on, the more distressful were his sensations. While my opportunities of observing him lasted, he seemed to be in that despairing state, in which he might have said with Goldsmith's benighted traveller—

> Lo! here forlorn and lost I tread,
> With fainting steps and slow,
> Where wilds, immeasurably spread,
> Seem lengthening as I go.

In the other case a more reserved melancholy followed the inhuman initiation into humane letters *(literæ humaniores)*: and a protuberance of the abdomen, accompanied by other scrophulous signs, seemed heightened by the mental sufferings into incipient atrophy. For the season insured us against the operation of cold, and there was no deficiency of substantial nourishment.

Our English schools seem not at all behind those abroad. By one who did not know their professed purpose, both might be taken for nurseries for scrophula. How well they answer to the character, is evident in general from the immense number of victims to fatal

scrophulous complaints among the youth in genteel life; and particularly from the prodigiously increasing frequency of crookedness or distortion in girls.

To dwell upon the other principal exciting causes of scrophula would be to no purpose. After what has been said, the following list will equally suffice for those, who may resolve to take the most effectual steps for obviating this evil, and for those who, after the fullest deliberation, imagine themselves obliged to determine that their sons and daughters must still take their chance.

An ascescent diet in infancy.
Abuse of purgatives.
Severe chills, or continued low temperature.
Of course, too light cloathing.
Habitual, or frequently renewed uneasiness of mind.
Want of fresh air and exercise.
Too much indulgence in bed, and in hot rooms.
Any other debilitating practices.

There are families, in which as there can be no doubt as to the imminence of the danger, there ought to be no hesitation as to the propriety of adopting a preventive plan, almost from the very moment of birth. Here if the mother be both feeble and scrophulous, it should be for-

bidden her to nurse. To the milk of a perfectly healthy foster-nurse, it will often be proper to join broth and diluted gravy. And should the history of the family, and the state of the little subject give ground for great alarm, a diet, in which milk forms but a very small proportion, will prove the most wholesome. Writers on infancy have not been insensible to the necessity of early recourse to preparations of animal food, where the constitution is feeble. But a superstitious regard to milk, derived from its real superiority in the healthy state, has hindered them from going far enough in those extreme cases, which I have at present in view. To a weakly child it is of no small consequence that it should interest its nurse. To this, digestible food will contribute more than may be supposed at first view, and without observation. An infant, tortured with perpetual acidity, will be perpetually torturing the ears of the attendants with its outcries. Hurtful methods of procuring an interval of peace will be pursued, or the nurse will desert her charge to breathe a few moments in quiet. I have known very young children become immediately placid on a change of food, and afford daily entertainment to all about them, by the expressions of their happy state of being.

The most sedulous attention should be bestowed upon cloathing and temperature. It is the most common part of the history of scrophulous invalids, that while they fluctuate between health and those terrible seizures, after which any moderate variation in the ordinary powers of nature can make little difference, threatening appearances shall arise in cold weather, and vanish in warm. Thus nothing is more familiar than to see glandular tumours about the neck come and go with the seasons. But it will not be sufficient in scrophulous habits to keep up a due warmth by mere covering. In children, able to use their limbs, the circulation should be kept brisk by frequent and gentle exercise; and they should never be suffered to languish on a bench for whole hours. At an earlier age, friction should be assiduously employed, as recommended in the preceding essay. On the approach of winter, and during an uncommonly rigorous season, it will be particularly expedient to be on one's guard against those relapses, which are so common in this complaint.

OF SOME MISTAKES IN OPINION AND PRACTICE.

Medical superstition is to be sought, not only in the peasant's hut, but in the city and in the palace; beside the toilette of the lady of first fashion, and in the cabinet of the philosopher—more or less disguised perhaps, but still the same in substance.

Doctor Chr. Aug. Struve Miscellan. I. 77.

The negative detriment from erroneous domestic opinions concerning disorders, is full as great as the positive. While the nugatory processes, to which they give occasion, are carrying on, the morbid disposition increases into disease, or a precarious changes into a desperate state. It may therefore be of service to enumerate some of the more common vulgar errors, that they may cease to be an impediment to the recovery of lost health, and to the improvement of bad constitutions.

It is frequently imagined that scrophulous tumours arise from tough, ropy humours, causing an obstruction in the tumified parts. The idea of viscidity of the humours must have arisen from some actual phenomenon, referred by the fancy to a place, in which it did not exist. The slimy or mucous stools in mesenteric atrophy are as likely to have given rise

to this mistake, as any other scrophulous symptom. In other forms of the disease, this slime must have been supposed to occupy the glands, and by clogging the vessels, to cause them to swell, as a stream enlarges when a dam is thrown across it. But there is no one reason for believing that such viscid humour exists in scrophulous glands. Its being discharged in the manner abovementioned, is certainly no better a reason than the discharge of similar mucus, when a person sneezes, blows his nose, or has breathed a cold atmosphere for some time. The surface of the intestines is destined to secrete mucus or phlegm; and an excess of this humour at particular times, indicates nothing in regard to distant parts, to which this function does not belong. But if we reject the supposition of viscidity in the humours, because it is totally without evidence, we can go a step farther as to obstruction. For here the negative can be proved. In glandular enlargements, the vessels are so far from being impervious, or less permeable than in the healthy state, that their area enlarges, and new ones form to carry on the circulation in proportion to the growth of

the gland beyond its natural size *. The case is exactly the same as with the growth of the whole body. There is an addition of mass and bulk; and the arteries and veins are found to become of larger diameter.

The exhibition therefore of those infusions and expressed juices (as that of cleavers or goose-grass, water-cress, scurvy-grass, sassafras tea), which are intended to attenuate the humours, and purify the blood, or to clear the passages, rests upon a wrong principle. Nor are objections to butter, as an article promoting obstructions, and relaxing the stomach and bowels better founded †. Its nutritive quality, on the contrary, renders it very fit for the scrophulous, in any quantity in which it is easily digestible.

Hard selenitic and calcareous waters have been given out by respectable observers for a cause of scrophula. M. de Luc, for in-

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* This is a matter of direct experiment. Ipse expertus sum, says Dr. Soemmerring, per glandulas absorbentes *tumidas* expeditiorem esse mercurii viam quam per glandulas *solitæ magnitudinis*.

† Panis, butyro illitus, sæpius sumptus, proculdubio infarctus facilitat, cum butyrum insuper primas vias relaxet nimiaque quantitate difficulter digeratur.

stance, (Lettres I. 17) remarks that where he has found incrusting or petrifying springs, there the people were scrophulous. In like manner, the water of melted snow has been held by many authors to be the cause of the bronchocele, or Derbyshire neck. But the property of waters of the first description, to deposit calcareous particles on the surface of the substances, over which they flow, combined with the hypothesis of obstruction, has obtained from various medical writers a sanction for this opinion, which it does not deserve *. The production of scrophula by cold and damp is supported by facts so pointed, that the greater number of cases in situations abounding with hard waters, may safely be referred to this head, though food of bad quality, and other evils attendant upon poverty, may claim their share also. BORDEU affirms, that in some valleys divided by a river, the part of the inhabitants exposed to the north are subject to glan-

* Quod vero assertum, licet ad strumas potissimum endemias pertineat, nullus tamen dubito tales aquas etiam diatheseos scrofulosæ evolutionem promovere malumque augere posse. - - Gottingæ scrofulæ frequentissimæ sunt; aquæ vero ibidem scaturientes calcareis particulis insigniter abundant.

dular swellings, while those on the other side are exempt, though both use the same food, and live in the same manner. The glandular swellings however in these instances seem to be the Derbyshire neck, or bronchocele, a disease confined to one particular gland low down in the neck, and nearly allied to scrophula, though persons affected by bronchocele have often no other scrophulous mark. Respecting the Derbyshire neck, accompanied, as it appears to me, with phænomena, in these cases, manifestly scrophulous, there is an authentic observation which deserves to be given entire, as it distinctly shews how glandular swellings may be produced in a short time by natural agents, operating constantly and with great intensity, though in general they take place slowly and imperceptibly, in consequence of the more gradual application of their exciting causes. "On occasion of tumours in the "neck, very prevalent in our military school," says the author of the observation, Dr. Lange of Cronstadt in Siebenburgen, "the com-"manding officer desired me to examine "the children —— I actually found thirty-"six among forty-eight affected. More-"over, of seven adults in the house, two "had the same complaint. All looked very

"cachectic, pale, and bloated. Many had "weeping eyes; the appetite was good in "all. The nature of the tumours was dif- "ferent in the different patients. In some "there was but one. Others had two or "three distinct. In others, several had con- "creted into a single cluster, which some- "times had its seat in the middle, and "sometimes on one side of the neck. Some "were of the size of a hazle nut, others of "that of a hen's egg. Some were spungy, "others fleshy, others cartilaginous to the "touch. On other parts of the body, even "in the belly, there was no hardness or en- "largement to be observed. The affection "had been noticed in the school for the "first time since the last winter. The di- "rector shewed me a child that had come "into the house in perfect health but three "weeks before, and he had already a tumour "of the size of a walnut."

"The officers seemed willing to seek the "cause of this complaint in the water, which "the children used for drinking. The water, "however, appeared to me perfectly inno- "cent, because on a chemical examina- "tion, it turned out the purest water in "Cronstadt; and also because the whole "neighbourhood, where no such complaint

" existed, was supplied from the very same
" well. The cause, therefore, must have been
" confined to the house itself. I asked if the
" children were made to wear their stock
" very tight? or if their scald heads were
" treated with hazardous external means?
" Both questions were answered in the ne-
" gative. After the strictest enquiry, I con-
" cluded that the cause of this general sei-
" zure was twofold."

" The first cause appeared to me to be the
" low, confined, damp, and crowded apart-
" ments. The whole forty-eight children
" lived in four small apartments on the
" ground floor. They mostly slept two in
" a bed; and the building was close by the
" foot of a hill, planted with fruit-trees.
" Moreover, some of the rooms had been
" stabling a few years before, in consequence
" of which every thing on the ground was
" mouldy."

" The second leading cause appeared to
" me to be the frequent use of leguminous
" fruits, and of other crude food. That
" these were the most probable causes of the
" malady, I was farther led to conclude from
" two soldiers' children, in whose cases both
" causes were very striking, and of whom
" both were similarly affected. I advised

"therefore, above all other things, to provide "the children with a healthy and spacious "habitation, and to put them upon light "vegetable diet. But as it was not so easy "to provide fresh quarters at a moment's "warning, I proposed in the mean time to "open the windows, to fumigate the apart- "ments with juniper-berries, to omit sprink- "ling the floors when the rooms were swept "out, to furnish them with vent-stoves, to "make air-holes opposite the windows, and "to give the children some wine daily."

By help of these measures, which in the main appear judicious, though some are of very questionable propriety, and by burnt spunge, mercurial laxatives, by some other medicines, and an eventual change of dwelling, "all the children" says Dr. Lange, "soon "regained their natural colour, and in a few "weeks not a glandular tumour was to be "found among them." After the perusal of such very striking facts, the friends of young people will need no farther inducement to examine whether there be any connection between their glandular ailments, and cold from moisture. I have known instances where these ailments appeared certainly to depend on the damp of a wall in the bed-room of a school, upon the same condition

of a miserable office where an attorney's clerk has been confined to his desk for a large portion of the day, and of ill-lighted, and ill-ventilated merchants' and bankers' compting-houses.

Concerning the treatment of scrophula, when it affects superficial parts, two opposite incorrect opinions seem to have been entertained. The one, that it is dangerous to disperse tumours or to heal ulcers, lest the scrophulous acrimony should migrate to more important organs, and excite fatal complaints: the second, that nothing further need be done than remove these local affections.

I have already noticed the great chance there is of giving mercury to the scrophulous, unawares, in the form of worm-medicines of secret composition. Mercury is known in very small quantity to bring on that state of the system, in which slight exposure will occasion mischief. Sometimes the injury is sudden and marked; more frequently, it is slighter and unnoticed. In all its degrees, it is more likely to fall to the share of the scrophulous, than of others. None suffering so much from inflammatory affections on the one hand, or from the severity of the elements on the other. And we know that medicines of the above description are usually

administered at random, without sufficient probability of their irregular action being observed or restrained, or of the necessary precautions being enforced. A few years ago, I was consulted by letter for the daughter of the keeper of a turnpike gate in ——shire. A quack medicine had been given her, which from its effects must have contained mercury. I could procure none for examination. But the surgeon who had been called in immediately on the seizure, ascertained that a degree of salivation had been excited. In this state she went out one bitter night to open the gate, and was detained by some embarrassment for several minutes in the cold. She felt the chill strike through her, and soon afterwards an ascites, or dropsy of the belly, came on, and proved fatal. The girl had glandular tumours about her neck before taking the medicine, and was of a scrophulous complexion.

Leaving imprudences like these out of the question, I am exceedingly doubtful if the removal of scrophulous affections in one part, will ever excite them in another. It is true indeed that dependance ought never to be placed upon this partial method. In various places, we meet with ignorant country practitioners, who profess to cure the scrophulous

ulcers of the common people; and they often succeed for a time. I have ascertained in three different parts of England, that they use plaisters with calomel for this purpose. But though the ulcer heals, another almost always breaks out. Whence it clearly appears to be in general absurd, to think of curing scrophula, without means, that affect the whole constitution. But there is no good reason to believe that mischief arises from this imperfect practice, when the substances employed do not get into the habit. A compleat collection of facts would, I am inclined to suppose, tend to shew that to subdue a local affection, is to lessen the whole disease. Sometimes indeed no more of it is seen after the healing of an ulcer by local applications merely.

There is another reason for doubting whether the more dangerous forms of the disease are owing to topical remedies, even when they follow the use of them. Nothing is more familiar to medical practitioners than to see a large joint, or an internal part, attacked at the very time of the spontaneous subsidence of swoln glands, or of the spontaneous drying up of an ulcer, or some time afterwards. Nay, one of the more serious scrophulous ailments shall begin and hold on

its course, while a slighter one of earlier origin is proceeding with equal pace. A number of instances have occurred among the crowd of scrophulous invalids, which have offered themselves to my observation; and from these I shall select a case, that will abundantly illustrate the position.

April 14, 1802.—Susanna L. aged 33, of a dull, muddy complexion, with light hair and eyes, No. 4, Cart-lane, Temple, Bristol, miscarried six months since. On coming down stairs, she took a most violent catarrh. Soon afterwards she became aware of a tumour, about the size of the end of her little finger, in the left submaxillary gland. It is at this time as large as a child's fist, has gathered, and appears on the point of breaking.

Six weeks ago, she was sensible of acute pain in her knee, and about a week since perceived that the joint was enlarged. This enlargement has all the characters of a white swelling.

On being questioned respecting the preceding state of her health, she said that at 16, she had an enlargement of her knee. This, she was told, was a white swelling. She remembers perfectly that it gave her much more pain, and was much more swelled than at present. It was then dispersed, as she

supposes, by a liniment, though the time of life may be suspected to have chiefly contributed to her recovery. Now had the submaxillary gland been reduced in this case by external applications, how easily might any one have been misled to ascribe the present white swelling to that mode of treatment?

No case can speak more strongly in behalf of the necessity of carefully watching persons of a scrophulous habit, when weakened by any cause whatever. And I was glad to have such a confirmation of the important lesson, which I had been inculcating in a part of the present essay, printed before the case of Susanna L. fell under my observation. Here we have an example of a new attack at the interval of fifteen years, and at the age of thirty-three, in a person by no means subject to the rigours of penury.

The two following instances may further serve to shew that, on occasion of catarrh somewhat more severe than usual, equal vigilance is necessary, even in the more robust among scrophulous men. For the feverishness, attending catarrh, gives rise to genuine scrophula, as well as the fever, attending small-pox and other complaints formerly mentioned.

Samuel L. aged 24, with dark hair, grey eyes, and fair skin, pitted with the small-

pox, husband of the preceding Susanna L. said he had caught a very bad cold, shortly before his wife miscarried; that in about three weeks afterwards he was sensible of a swelling under his jaw; and that observing it to go on encreasing, he applied, when it had reached the size of a pullet's egg, to a public charity, and was told *it would never come to hurt him.* He says his strength is considerably reduced; and his general appearance bespeaks indisposition. The swelling which is in the right submaxillary gland has suppurated, and now discharges matter. Near it are several enlarged lymphatic glands. One in the axilla is proceeding fast to suppuration, and there are others hard and swelled near the collar-bone.

William D——, Tyler's-Court, Lewin's-Mead, Bristol, aged 29, with dark hair and grey eyes, (which two circumstances often concur in scrophula), skin not sensibly smooth or fair, and of a robust habit—six years ago caught a very violent cold, and has never since been free from cough and mucous expectoration in cold weather. In about three months after the commencement of his catarrh, the right submaxillary gland began to swell. After a time it broke, leaving a scar of the usual appearance. In about

a twelvemonth from the first seizure by the catarrh, a hardness was sensible in the submaxillary gland of the other side. This continued nearly in the same state for above four years; nor did it increase much till some time in the course of the winter just past. It broke only within these five days. The patient seems inclined to ascribe the last gathering also to another bad cold. His history clearly shews how unsafe it is to rest satisfied with any distinct scrophulous complaint, though it may subsist in the most perfect quiescence. Such a complaint ought to be considered as an enemy in ambush, ready to make his assault as soon as an opportunity offers: and to make it with more effect, as the person he attacks is less robust.

Should the proposal at the end of the present essay towards more effectual instruction in the art of preserving health be thought worthy of acceptance, it will be in my power, for some time to come, to bring forward these three instructive patients to those, who may wish to hear their story from their own lips.

The two latter declared that their relations, so far as they knew, had never been affected with any complaints of a like nature. Little stress indeed can be laid upon the testimony

of the poor in a case of this kind. But in families, too well informed to be ignorant of such an event, and too candid to suppress any information, which the physician may require, I have many times met with the same reason for believing that *scrophula is often not hereditary.* From the nature of the complaint indeed, I think we ought to be assured that it may originate in any individual without the least hereditary predisposition. One might, without much risk of failure, if such trials were allowable, engage to produce it by art. Such trials indeed have been unintentionally made with a result as decisive as in experiments conducted according to the most deliberate plan. Men and quadrupeds transported from their native hot climates into our colder latitudes, become continually scrophulous. Numerous examples of this fact have been afforded by negroes, and by apes of different species. These observations combined with the information to be obtained in families, leave no room for doubting that Europeans are perpetually rendered scrophulous as well by privation of warmth and of other necessaries, as by causes of a different nature.

Another prevailing error of considerable importance, as it tends to the destruction of

many constitutions, and to the encouragement of fraud, is the confounding of certain affections of the skin with scrophula. The news-papers are perpetually offering a cure for *scurvy in the blood*, and for the king's evil. Now the eruptions, vulgarly called *scorbutic* have no affinity to *scrophula*; and it is either the similarity of these two words in sound, or the occasional injury to the skin by the scrophulous swelling and suppuration of superficial glands, that keeps up this miserable delusion. So easily do property and life become the prey of the vilest and most clumsy impostures, when man is left in ignorance concerning himself, so that his hopes and fears, relative to this dearest of all objects, are subject to no sort of controul from reason!

About half a century ago, Dr. Russell published his celebrated dissertation on the use of sea-water in glandular atrophy, and in other diseases of the glands. The testimonies of other respectable practitioners have since been added; and a large part of the public has learned to look towards the sea as a resource, to which they may fly in case of need without further enquiry.

The effects of sea-water and of the sea-air seem to be confounded in many minds.